

PATENT  
MAIL STOP ISSUE FEE  
1510-1112

IN THE U.S. PATENT AND TRADEMARK OFFICE

In re application of	Allowed April 16, 2009
Edvard KALVESTEN et al.	Conf. 7312
Application No. 10/550,199	Group 2891
Filed July 11, 2006	Examiner Luan C. THAI
ELECTRICAL CONNECTIONS IN SUBSTRATES	

REQUEST FOR CORRECTED FILING RECEIPT

Assistant Commissioner for Patents	April 22, 2009
P.O. Box 1450	
Alexandria, VA 22313-1450	

Sir:

Receipt is acknowledged of the Filing Receipt for  
Serial No. 10/550,199.

It is requested that a new Filing Receipt be issued on  
which the first name of the third inventor is correctly given as  
NIKLAS, as shown by the accompanying originally-filed page 3 of  
the Application Data Sheet.

Respectfully submitted,

YOUNG & THOMPSON

Benoit Castel

---

Benoit Castel, Reg. No. 35,041  
209 Madison Street, Suite 500  
Alexandria, VA 22314  
Telephone (703) 521-2297  
Telefax (703) 685-0573  
(703) 979-4709

10/550199

2005 Rec'd PCT/PTO 21 SEP 2005

Application Data Sheet

**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	ELECTRICAL CONNECTIONS IN SUBSTRATES
Attorney Docket Number::	1510-1112
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	15
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SWEDEN  
Status:: Full Capacity  
Given Name:: EDVARD  
Middle Name::  
Family Name:: KÄLVESTEN  
Name Suffix::  
City of Residence::  
State or Province of HÄGERSTEN  
Residence::  
Country of Residence:: SWEDEN  
Street of Mailing EDELCRANTZVÄGEN 20  
Address::  
City of Mailing Address::  
State or Province of Mailing Address:: HÄGERSTEN  
Country of Mailing Address:: SWEDEN  
Postal or Zip Code of Mailing Address:: S-129 38

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SWEDEN  
Status:: Full Capacity  
Given Name:: THORBJÖRN  
Middle Name::  
Family Name:: EBEFORS  
Name Suffix::  
City of Residence::  
State or Province of HUDDINGE  
Residence::  
Country of Residence:: SWEDEN  
Street of Mailing KALLKÄRRSVÄGEN 28  
Address::  
City of Mailing Address::

State or Province of Mailing Address:: HUDDINGE  
Country of Mailing Address:: SWEDEN  
Postal or Zip Code of Mailing Address:: S-141 41

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SWEDEN  
Status:: Full Capacity  
Given Name:: NIKLAS  
Middle Name::  
Family Name:: SVEDIN  
Name Suffix::  
City of Residence::  
State or Province of STOCKHOLM  
Residence::  
Country of Residence:: SWEDEN  
Street of Mailing KARLAVÄGEN 27  
Address::  
City of Mailing Address::  
State or Province of Mailing Address:: STOCKHOLM  
Country of Mailing Address:: SWEDEN  
Postal or Zip Code of Mailing Address:: S-114 31

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SWEDEN  
Status:: Full Capacity  
Given Name:: PELLE  
Middle Name::  
Family Name:: RANGSTEN  
Name Suffix::  
City of Residence::  
State or Province of STORVRETA  
Residence::  
Country of Residence:: SWEDEN  
Street of Mailing VRETALUNDSVÄGEN 8

Address::  
City of Mailing Address::  
State or Province of Mailing Address:: STORVRETA  
Country of Mailing Address:: SWEDEN  
Postal or Zip Code of Mailing Address:: S-743 34

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SWEDEN  
Status:: Full Capacity  
Given Name:: TOMMY  
Middle Name::  
Family Name:: HUHTAOJA  
Name Suffix::  
City of Residence::  
State or Province of TYRESÖ  
Residence::  
Country of Residence:: SWEDEN  
Street of Mailing RULLSTENSGRÄND 6  
Address::  
City of Mailing Address::  
State or Province of Mailing Address:: TYRESÖ  
Country of Mailing Address:: SWEDEN  
Postal or Zip Code of Mailing Address:: S-135 50

**Correspondence Information**

Correspondence Customer 00466  
Number::

**Representative Information**

Representative Customer	00466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/SE2004/000439	3/22/04

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
SWEDEN	0300784-6	3/21/03	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::